PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875						Applied to	Application or Docket Number		
CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY						OR.	OTHER THAN OR. SMALL ENTITY		
FOR NUMBE		ER FILED NUMBER EX		PA .		٦. ٔ			
ASIC FEE 17 CFR 1.16(a))		: .		. RATE	FEE	\dashv	RATE .	FEE	
OTAL CLAIMS IZ CFR 1.16(c))	. minus	20 = .	•	 	· S··	OR		·\$	
IDEPENDENT CLAIMS 7 CFR 1.16(b))				X:S=		OR	· X S=		
	minus			. X S=	 	OR	x 2 · · · =		
ULTIPLE DEPENDENT CL				+ \$:=		OR	+s=		
f the difference in column	1 is less than zero,	enter "0" in colum	nn 2.	TOTAL		. OR	TOTAL		
CLAIM	S'AS AMENDE	D – PARTII			· .		TOTAL		
12235	-		• • •	•					
100 0 0 000	olumn 1) .	: (Column 2)	-(Column 3)	· SMALL	ENTITY	ÖR		R THAN.	
	MAINING AFTER	AUMBER SDEVIOUSL	===/	RATE	ASDI/	i	RATE	1	
i AME	NDMENT .	PREVIOUSLY PAID FOR	EXTE		TICHEL	1		ADDI- TIOHA	
Totál (37 CFR 1.16(a))	39. Minus	134	1 -	X \$ · . =	1	1		FEE	
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9.2		·. ·.	L. L.	TOTAL	/		τξ <u>΄</u> ε		
/ // 3		:. ·		TOTAL ADD'L FEE		OR .	TOTAL . ADD'L FEE		
	umn 1)	(Column 2)	. (Column 3)	/	l · · ·	¯	· · · · · · · · · · · · · · · · · · ·		
REN	LAIMS IAINING	HIGHEST NUMBER	PRESENT	RATE	. ADDI-]			
· · · · · AMEI	TTER VDMENT	PREVIOUSLY PAID FOR	EX⁻R∆	T IVALE	LANCIT		. RATE	ADDI- TIONAL	
Total .* (37 CFR 1.16(c))	Minus	**	=	<u> </u>	FEE	1 1		FEE	
Independent (37 CFR 1.16(b))	Minus	***	=	· × \$=		OR .	X S=		
FIRST PRESENTATION C	NE 14 II TIDI E DEDE II			X.S=		OR	x s=	<u> </u>	
	MOLTIPLE DEPEND	ENI CLAIM (3.7 C	FR 1.16(d))	+-5=		OR	+ \$=		
		·· · · ·		TOTAL ADD'L FEE		ØR .	TOTAL ADD'L FEE		
<u>(</u> Con	mn 1)	- (Column 2).	(Column 3)						
	AIRING	NUMBER	PRESENT	DATE !	105	1			
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Total -	Minus	**	=	 	FEE	-		FEE	
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FIRST FRESENTATION OF	MULTIFLE DEFENDE	117 CL - 11 13, CF	Arite o	+ :					
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This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, on the amount of time you require to complete this form and/or suggestions for reducing bloods should be accompleted. Any comments